2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

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Jan 24, 2013
Secretary of State
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Entity Name: BABCOCK HEALTHCARE EDUCATION SERVICES, LLC

Current Principal Place of Business:

4025 GROVE STREET SOUTH
ST. PETERSBURG, FL 33705

Current Mailing Address:

POST OFFICE BOX 12725
ST. PETERSBURG, FL 33733 US

FEI Number: 20-1891669

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BABCOCK, WILHELMENIA F
4025 GROVE STREET SOUTH
ST. PETERSBURG, FL 33705 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	MGRM	Title	MGRM
Name	BABCOCK, WILHELMENIA F	Name	BABCOCK, PAUL E
Address	4025 GROVE STREET SOUTH	Address	4025 GROVE STREET SOUTH
City-State-Zip:	ST. PETERSBURG FL 33705	City-State-Zip:	ST. PETERSBURG FL 33705

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: PAUL E. BABCOCK CO OWNER 01/24/2013

Electronic Signature of Signing Authorized Person(s) Detail — Date